

#### **APPLICATION DATA SHEET**

**Application Information** 

Application type:: Regular

Subject matter:: Utility

CD-ROM or CD-R?:: None

Title:: Method

Attorney Docket Number:: 14923.0032

Request for Early Publication:: No

Request for Non-Publication:: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 4

Small Entity?:: No

Licensed US Govt. Agency:: No

Contract or Grant Numbers:: No

Secrecy Order in Parent Appl.?:: No

**Applicant Information** 

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Finland

Status:: Full capacity

Given Name:: Nina

Middle Name::

Family Name:: Rautonen

Name Suffix::

City of Residence:: Espoo

State or Province of Residence::

Street of mailing address:: Saynavakuja 4B8

City of mailing address:: Espoo

State or Province of mailing address::

Country of mailing address:: Finland

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Postal or Zip Code of mailing address:: FIN-02170

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Finland

Status:: Full capacity

Given Name:: Jussi

Middle Name::

Family Name:: Nurmi

Name Suffix::

City of Residence:: Parainen

State or Province of Residence::

Street of mailing address:: Bodnasin Rantatie 72

City of mailing address:: Parainen

State or Province of mailing address::

Country of mailing address:: Finland

Postal or Zip Code of mailing address:: FIN-21600

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Finland

Status:: Full capacity

Given Name:: Paivi

Middle Name::

Family Name:: Nurminen

Name Suffix::

City of Residence:: Kirkkonummi

State or Province of Residence::

Street of mailing address:: Eerikinkaillio 3 E 21

City of mailing address:: Kirkkonummi

State or Province of mailing address::

Country of mailing address:: Finland

Postal or Zip Code of mailing address:: FIN-02400

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Applicant Authority Type::

Inventor

Primary Citizenship Country::

Finland

Status::

Full capacity

Given Name::

Pauli

Middle Name::

Family Name::

Puolakkainen

Name Suffix::

City of Residence::

Espoo

State or Province of Residence::

Street of mailing address::

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State or Province of mailing address::

Country of mailing address::

**Finland** 

Postal or Zip Code of mailing address:: FIN-02170

#### **Correspondence Information**

Correspondence Customer Number::

27890

## **Representative Information**

Representative Customer Number::

27890

## **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	national stage	PCT/IB2004/003273	09/24/2004

## **Foreign Priority Information**

Country	Application number::	Filing Date::	Priority Claimed::
GB	0323039.8	10/01/2003	Yes

# **Assignee Information**

Assignee name:: Danisco A/S

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State or Province of mailing address::

Country of mailing address:: Denmark

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